OGE Form 278e (January 2018)

U.S. Office of Government Ethics; 5 C.F.R. part 2634 | Form Approved: OMB No. (3209-0001)

C.D. Chico of Government Zames, v Car.	
Report Type:	New Entrant
Year (Annual Report only):	
Date of Appointment/Termination:	08/06/2018

UNITED STATES OFFICE OF GOVERNMENT ETHICS **Preventing Conflicts of Interest

in the Executive Branch

Executive Branch Personnel Public Financial Disclosure Report (OGE Form 278e)

Filer's Information				
Last Name	First Name	МІ	Position	Agency
Rychalski	Sophia	G	Clerk	OPM
				· · ·
Other Federal Government Pos	sitions Held During the Preceding 12	2 Months:		
Congressional Intern, U.S. S	Senate	,		
Name of Congressional Comm	ittee Considering Nomination (Nom	ninees only):		
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	hat the statements I have made in th	is report are true,		my knowledge:
Signature:	a in Children Mi	<u> </u>	Date:	n al E
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A server Pthics Official's Onin	ion. On the basis of information of	entained in this rea	cort I conclude that the filer is in as	
(subject to any comments below	1011 — Off the passs of information co	wramen m mrs ref	port, i concinue mai me mei is m et	ompliance with applicable laws and regulations
Signature:	<u>w)</u> /		Date:	
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woll	- flentario		1 0/10/10	
Other Review Conducted By:		<u> </u>		
Signature:		•	Date:	
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U.S. Office of Government Eth	hics Certification (if required):			
Signature:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Date:	
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Comments of Reviewing Office	cials:			
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OGE Form 278e (January 2018) Instructions for Part 1 Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information. Page Number Filer's Name Part 1: Filer's Positions Held Outside United States Government To Position Held From Organization Type City/State Organization Name November 2016 January 2018 Sales Associate Retail Corporation Alexandria, Va Lilly Pulitzer August 2017 June 2017 Camp Counselor Summer Camp Alexandria, Va Browne Academy Summer Camp August 2016 Camp Counselor June 2016 Summer Camp Browne Academy Summer Camp Alexandria, Va 19. 10. 12. 13. 14. 15.

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Nator This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

	e: This is a public form. Do not include account numb	ers, stree	et addresses, or family memb	et names. See mstru	Page Number
File	r's Name				
	The Target & Theorem and	Retiren	ent Accounts		·
Pa	rt 2: Filer's Employment Assets & Income and	EIF	Value	Income Type	Income Amount
	Description Lilly Pulitzer	N/A		Salary	\$3,047
		1110		Salary	\$2,960
2.	Browne Academy Summer Camp	N/A		Salary	
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		o not include acc	ount numbers, street addresses, or family member names. See instructions for required inform	ation.	
File	r's Name			Page Num	ber
	rt 3: Filer's Employm		and Arrangements	· 1	
#	Employer or Party	City/State	Status and Terms		Date
1.	None			į.	
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Name and Publishers				•	

Nator This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

		ie account numbei	s, street addresses, or family member hames. See instructions for requi	Page Number
ile	r's Name		•	7 401 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		ation Translina	\$5,000 in a Vear	
	rt 4: Filer's Sources of Compens: Source Name	City/State	Brief Description of Duties	
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File	r's Name					Page Number
Pa	rt 5: Spouse's Employment Assets & Income and	Retir	ement Accounts			
#	Description	EIF	Value	Income Type	Income Amount	
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Instructions for required information.

| Instructions for required information | Page Number |
| Instructions for required information |
| Page Number |

Name '				Income T	vne I	ncome Amount	
Agreets and Income	EIF	Value		Interest	<u> </u>	None (or less than \$201)	
6: Other Assets and Income	FIR	\$1,001 -	\$15,000	Interest			
Description	WA						
Description 3B&T (Checking and Savings)			•			· · · · · · · · · · · · · · · · · · ·	
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e: This is a public form. Do not include account number	rs, street addresses, or tarring to		Page Number	
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rt 7: Transactions			11	
Description	Туре	Date	Amount	,
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Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

	e: This is a public form. Do not include according to the second					Page Number
Par	t 8: Liabilities					
	Creditor Name	Type	Amount	Year Incurred	Rate	Term
1.	None					
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File	er's Name		Page	Number
	rt 9: Gifts and Travel Reimb			
	Source Name	City/State	Brief Description	Value
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